CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

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PRACTICES COMMISSION

| Please type or print in ink. | 12 FFD 1 20 |
|---|---|
| NAME OF FILER (LAST) | (FIRST) (MIDDLE) |
| BLAKESLEE SA | AM |
| 1. Office, Agency, or Court | |
| Agency Name | |
| CALIFORNIA STATE LEGISLATURE | |
| Division, Board, Department, District, if applicable | Your Position |
| STATE SENATE | SENATOR |
| ▶ If filling for multiple positions, list below or on an attachment. | |
| Agency: | Position: |
| 2. Jurisdiction of Office (Check at least one box) | |
| State State | ☐ Judge or Court Commissioner (Statewide Jurisdiction) |
| Multi-County | County of |
| City of | Other |
| | |
| 3. Type of Statement (Check at least one box) | |
| Annual: The period covered is January 1, 2011, through | Leaving Office: Date Left/ |
| December 31, 2011. | (Check one) The period covered is lanuary 1, 2011, through the date of |
| The period covered is/, throug December 31, 2011. | leaving office. |
| Assuming Office: Date assumed/ | The period covered is/, through the date of leaving office. |
| Candidate: Election Year Office sought, i | if different than Part 1: |
| 4. Schedule Summary Check applicable schedules or "None." ▶ 76 | Total number of pages including this cover page:2 |
| | |
| Schedule A-1 - Investments – schedule attached Schedule A-2 - Investments – schedule attached | Schedule C - Income, Loans, & Business Positions – schedule attached Schedule D - Income – Gifts – schedule attached |
| Schedule B - Real Property – schedule attached | Schedule E - Income - Gifts - Schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached |
| -or- | |
| | interests on any schedule |
| 1 | |
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| | |
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| | |
| | |
| nerein and in any attached schedules is true and complete. I acknowled | |
| I certify under penalty of perjury under the laws of the State of Cali | ifornia that |
| Date Signed (mylin, day, year) | Signature |
| <u> </u> | |

SCHEDULE A-2 Investments, Income, and Assets

of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

| CAL | IFORNIA F | ORM | 70 | N |
|------|---------------|-----|----|-----|
| | OLITICAL PRAC | | | |
| Name | € | | | - " |
| BIA | KESLEE S | ιλι | | |

| ► 1. BUSINESS ENTITY OR TRUST | ▶ 1. BUSINESS ENTITY OR TRUST |
|---|--|
| BLAKESLEE & BLAKESLEE | BLAKESLEE & BLAKESLEE |
| Name 1101 MARSH ST., SAN LUIS OBISPO, CA 93401 | Name 1101 MARSH ST., SAN LUIS OBISPO, CA 93401 |
| Address (Business Address Acceptable) | Address (Business Address Acceptable) |
| Check one Trust, go to 2 Business Entity, complete the box, then go to 2 | Check one Trust, go to 2 Business Entity, complete the box, then go to 2 |
| GENERAL DESCRIPTION OF BUSINESS ACTIVITY FINANCIAL PLANNING | GENERAL DESCRIPTION OF BUSINESS ACTIVITY FINANCIAL PLANNING |
| FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 | FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 \ |
| NATURE OF INVESTMENT Sole Proprietorship Partnership Other | NATURE OF INVESTMENT ☐ Sole Proprietorship ☐ Partnership ☒ C-CORPORATION Other |
| YOUR BUSINESS POSITION PRESIDENT | YOUR BUSINESS POSITION BROKER (SPOUSE) |
| ► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) | > 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) |
| \$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 X OVER \$100,000 \$1,001 - \$10,000 | \$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 \$ OVER \$100,000 |
| ▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.) | ➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.) |
| | |
| ► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD <u>BY</u> THE BUSINESS ENTITY OR TRUST | ► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST |
| Check one box: | Check one box: |
| ☐ INVESTMENT ☐ REAL PROPERTY | ☐ INVESTMENT ☐ REAL PROPERTY |
| Name of Business Entity, if Investment, <u>or</u> | Name of Business Entity, if Investment, or |
| Assessor's Parcel Number or Street Address of Real Property | Assessor's Parcel Number or Street Address of Real Property |
| | |
| Description of Business Activity <u>or</u> City or Other Precise Location of Real Property | Description of Business Activity or City or Other Precise Location of Real Property |
| FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 | FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 \ \$100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000 |
| NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership | NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership |
| Leasehold Other | Leasehold Other |
| Check box if additional schedules reporting investments or real property are attached | Check box if additional schedules reporting investments or real property are attached |
| Comments: | FPPC Form 700 (2011/2012) Sch. A-2 |